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1c583 U.S. PTO

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	112025-0125
	First Inventor or Application Identifier	Frederick E. Niemi
	Title	DYNAMIC CONFIGURATION AND UP-DATING OF INTEGRATED DISTRIBUTED APPLICATIONS
	Express Mail Label No.	EXPRESS-MAIL LABEL NO.

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility application contents	ADDRESS TO: Assistant Commissioner for Patent Box Patent Application Washington, DC 20231
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1.  \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2.  Specification [Total Pages  ]  
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3.  Drawing(s) [Total Sheets  ]

4. Oath or Declaration [Total Pages  ]

a.  Newly executed (original copy)

b.  Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 17 completed)  
[Note Box 5 below]

i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5.  Incorporation By Reference (useable if Box 4b is checked)  
 The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein

6.  Microfiche Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence Sequence Submission  
((if applicable, all necessary))

a.  Computer Readable Copy

b.  Paper Copy (Identical to computer copy)

c.  Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

8. Assignment Papers (cover sheet & document(s))

9. 37 C.F.R. §3.73(b) Statement (when there is  Power of Attorney an assignee)

10. English Translation Document (if applicable)

11. Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations

12. Preliminary Amendment

13. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)

14. \*Small Entity Statement(s)  Statement filed in prior application, Status still proper and desired ((PTO/SB/09-12)

15. Certified Copy of Priority Document(s) (if foreign priority is claimed)

16. Other:

**\*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C. F. R. §1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C. F. R § 1.28).**

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment.

Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: /

Prior application Information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

**18. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label \_\_\_\_\_ or  Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name	Charles J. Barbas				
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City	Boston	State	MA	Zip Code	02110
Country	U. S. A.	Telephone	(617) 951-2500	Fax	(617) 951-3927

Name (Print/Type)	Charles J. Barbas	Registration No. (Attorney/Agent)	32,959
Signature		Date	July 2, 1999

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# FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.  
These are the fees effective October 1, 1997.

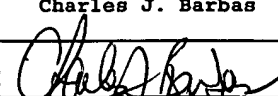
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

## Complete If Known

Application Number	Not yet assigned
Filing Date	July 2, 1999
First Named Inventor	Frederick E. Niemi
Examiner Name	Not yet assigned
Group / Art Unit	Not yet assigned
Attorney Docket No.	112025-0125

TOTAL AMOUNT OF PAYMENT (\$ ) 0

<p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <input type="text"/></p> <p>Deposit Account Name: <b>Cesari and McKenna, LLP</b></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §§1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 C.F.R. §§1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input type="checkbox"/> Payment Enclosed:  <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other Order</p>	<p><b>FEE CALCULATION (continued)</b></p> <p><b>3. 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<b>SUBMITTED BY</b>			<b>Complete (if applicable)</b>		
Typed or Printed Name	Charles J. Barbas		Reg. Number	32,959	
Signature		Date	July 2, 1999	Deposit Account User ID	

